

FORM 3011-1 (1/08)

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF OKLAHOMA**

IN RE:

Tiger Petroleum Comp,

Debtor(s).

Case No. 99-01273-MChapter 7

2008 DEC 29 AM 9:45
FILED
U.S. BANKRUPTCY COURT
NORTHERN DISTRICT OF OKLA.

APPLICATION FOR PAYMENT OF UNCLAIMED FUNDS

Inc.
The Financial Resources Group ("Applicant") applies to this Court for entry of an order directing the Clerk to remit the sum of \$4,750.37 due to James G & Phyllis M Lemmons ("Claimant").

1.	Full legal name of Claimant (If Claimant is an individual, skip to Question No. 5)	Shriners Hospital for Children successor in interest, James G & Phyllis M Lemmons
2.	Type of Entity (corporation, LLC, partnership)	Corporation
3.	State of Incorporation/Organization	Florida
4.	Name and Title of Authorizing Officer or Representative	James M Full Executive Vice President
5.	Current Mailing Address	PO Box 31356 Tampa, FL 33631-3356
6.	Telephone Number	813-281-7153
7.	SS# (last 4 digits only) or EIN #	36-2193608
8.	Amount Being Claimed	\$4,750.37

Applicant represents that Applicant is authorized to submit this Application and is entitled to receive the requested funds based upon:

(check the applicable box)

- ☐ Applicant is the original creditor and owner of the funds as it appears on the records of this Court;
- ☐ Applicant is the assignee of the original creditor's claim to said funds, as evidenced in the attached documentation;
- ☐ Applicant is the original creditor's successor in interest, as evidenced in the attached documentation;

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- ☒ Applicant is an attorney or "funds locator," named in a special/limited power of attorney, which document is attached hereto, that is valid under the laws of the State of Oklahoma, that empowers Applicant to collect the unclaimed funds described above on behalf of the Claimant. Applicant states that the Claimant is the:

(check the applicable box)

- ☐ original creditor and owner of the claim;
- ☐ original creditor's attorney with authorization to receive said funds;
- ☐ assignee of the original creditor's claim to said funds;
- ☒ successor in interest of the original creditor; or
- ☐ personal representative of the original creditor's estate.

Attached to the Application is the "Affidavit of Claimant." *(The Affidavit of Claimant is required only if the Applicant is an attorney or funds locator.)* Applicant completed all necessary information on the Affidavit of Claimant prior to providing such Affidavit to the Claimant for execution. *(This is necessary to ensure that the alleged claimant, contacted by a funds locator, has sufficient information to verify that he/she/it is in fact entitled to the funds that the attorney or "funds locator" is applying for on behalf of the Claimant.)*

This Application is submitted with the necessary documents to establish (1) Applicant's authority to collect the unclaimed funds on behalf of the Claimant and (2) the Claimant's entitlement to the particular unclaimed funds. The Application was completed and submitted in accordance with this Court's **Instructions for Filing an Application for Payment of Unclaimed Funds**.

Applicant declares under penalty of perjury that sufficient inquiry has been made to determine that the above funds have not been previously paid, no other applications for payment of said funds are pending, and no party other than Claimant is entitled to submit a request for disbursement of the funds.

Applicant certifies that a copy of this Application (and all attachments) was provided to the Office of the United States Attorney, Northern District of Oklahoma, Attn: Civil Process Clerk, 110 W. 7th Street, Suite 300, Tulsa, Oklahoma 74119-1029, as evidenced by the Certificate of Service attached hereto.

Applicant requests that the Court enter an Order directing payment of the unclaimed funds described above to the Applicant, or if the Applicant is not the Claimant, to the Applicant and Claimant, in accordance with the documents submitted in support of the Application.

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[FORM OF] CERTIFICATE OF SERVICE

In accordance with 28 U.S.C. § 2042, the undersigned hereby certifies that on 12/02/08, a true and correct copy of the foregoing Application (and all attachments) was mailed via first class mail, postage prepaid, to:

United States Attorney
Attn: Civil Process Clerk
110 West 7th Street, Suite 300
Tulsa, Oklahoma 74119-1029

Debtor Attorney
Mark A. Craige
3501 S. Yale
Tulsa, OK 74135

Debtor, Tiger Petroleum Company
1438 S. Boston
Tulsa, OK 74119

Trustee Attorney
Bonnie Hackler
320 S Boston Ave.,
Ste 400
Tulsa, OK 74103

Case Trustee
Steven W. Soule
320 S Boston Ave., Suite 200
Tulsa, OK 74103-3706

Original Creditors
Deceased

U.S. Trustee
2245 Boulder Ave., Ste 225
Tulsa, OK 74103-3026

Note: Pursuant to Local Bankruptcy Rule 3011-1(B), notice of the Application shall also be served upon the following parties:

1. *Debtor and Debtor's counsel, if any;*
2. *Trustee for the above referenced bankruptcy case*
3. *United States Trustee; and*
4. *Original creditor and creditor's counsel, if any, if the Claimant is not the original creditor in the case.*

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UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF OKLAHOMA

IN RE:

Tiger Petroleum Comp,

Debtor(s).

Case No. 99-01273-M

Chapter 7

AFFIDAVIT OF CLAIMANT

(for use when Applicant is an attorney or funds locator)

I, Larry L. Moses, the undersigned claimant (or duly authorized representative for the claimant as identified in paragraph (2)), declare as follows:

1. The Financial Resources Group, Inc. 700 Mechem Dr., Suite 8B
(Name and Address of Funds Locator) Ruidoso, NM 88345
has been granted a power of attorney to submit an Application For Payment of Unclaimed Funds (or I am the duly authorized representative for claimant as indicated in the attached power of attorney) seeking payment of:

(select one)

☒ claim number scheduled (if no claim was filed write "scheduled" in blank space) for which the dividend of \$4,750.37 is due and owing to me or the entity I represent as claimant in the above referenced bankruptcy case;

☐ funds deposited in the name of the debtor in the amount of \$_____.

2. My name, position with company *(if claimant is not an individual)*, address and telephone number are as follows:

Larry L Moses, General Manager
700 Mechem Dr., Suite 8B
Ruidoso, NM 88345
575-257-1607

3. Copies of all necessary documentation, including those which establish the chain of ownership of the original corporate creditor (e.g., documents relating to a sale of company, purchase agreements and/or stipulation by prior and new owner as to right of ownership of funds) and which substantiate claimant's right to the funds, are attached.

4. I (or the business that I represent as claimant) have neither previously received these funds nor contracted with any other party other than the person named in item one above to recover

FORM 3011-1 (1/08)

these funds.

I hereby certify that the foregoing statements are true and correct to the best of my knowledge and belief.

Dated: 12/02/08



Signature of claimant or duly authorized representative of claimant

Larry L Moses

Print Name

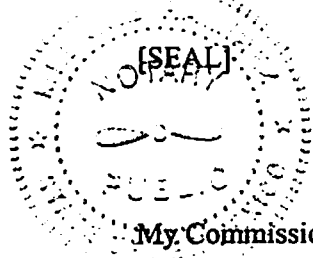
General Manager

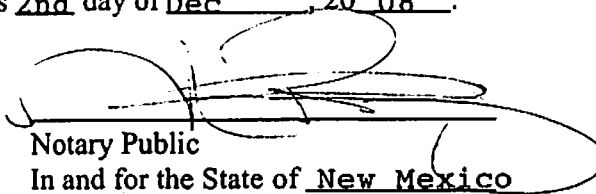
Title

91-1592987

EIN # of entity or last 4 digits of SS# of individual claimant

Sworn to and Subscribed before me on this 2nd day of Dec, 20 08.





Notary Public
In and for the State of New Mexico

My Commission expires: 12/21/11

Letter of Authorization

KNOW ALL THESE MEN THESE PRESENT, that I,

Frank Kloss, President of The Financial Resources Group, Incorporated.,

hereby appoint Larry L. Moses, General Manager, as The Financial Resources Group, Incorporated's authorized representative to seek recovery of the undistributed, unclaimed, or undeliverable tenders of funds held by the United States Treasury.

Signed this 2nd day of Dec, 2008

The Financial Resources Group, Incorporated
Company Name

By [Signature]
Signature

THE FINANCIAL RESOURCES GROUP, INC.

Frank Kloss
Print Name

Frank Kloss
President

President
Title

700 MECHEM DRIVE, SUITE 8B
RUIDOSO, NEW MEXICO 88345
TELEPHONE 800-328-9174 FAX 800-352-0597

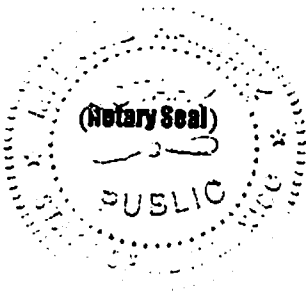
State of New Mexico, County of Lincoln

The above named Frank Kloss, known to me to be the individual described in (and holding the position designated in) the foregoing instrument, appeared before me and acknowledged the execution thereof to be his/her free act and deed.

Before me: [Signature]

Notary Public

My Commission expires: 12/21/11



**IN THE UNITED STATES BANKRUPTCY COURT
FOR THE NORTHERN DISTRICT OF OKLAHOMA**

IN RE:)
)
TIGER PETROLEUM COMPANY) Case No. 99-01273-M
) (Chapter 7)
)
Debtor.)

**REPORT OF TRUSTEE OF UNCLAIMED DIVIDENDS
AND OTHER MONIES UNDER 11 U.S.C. SECTION 347**

To the United States Bankruptcy Court Clerk:

Steven W. Soulé, Trustee in the above-styled case, hereby reports that there are thirty-three (33) distribution checks that remain unclaimed. All distribution checks were written and mailed on June 6, 2006, pursuant to this Court's order. The Trustee made numerous attempts to locate any claimant whose check was returned to the Trustee. We were able to locate quite a few who eventually deposited their checks, however, certain claimants were not located.

In addition, the Trustee's office has been made aware that numerous claimants are now deceased and that there appears to be conflict as to what third party is the legal heir to said proceeds.

Due to the fact the Trustee is unable to locate the claimant or determine the legal heir in the checks that have not been presented for payment, all remainder funds are being turned over to this Court.

Attached as Exhibit "A" is a list of the names and most recently known post office addresses of the claimants and their respective amounts payable.

Total transferred into the registry of the Court: \$244,840.48.

These funds are the only remaining funds in this estate. Therefore, the Trustee is forwarding said funds to the Court until proper determination.

Enclosed herewith is the estate's check made payable to this Court in the total amount of \$244,840.48.

Dated: October 30, 2006.



Steven W. Soule, OBA #13781
320 South Boston Avenue
Suite 400
Tulsa, Oklahoma 74103-3708
(918) 594-0400 Office number
(918) 594-0505 Fax number
ssoule@hallestill.com

EXHIBIT "A"

- | | | |
|-----|--|-------------|
| 1. | William and Betty Larrimore
Larrimore Family Trust
One Woods Court
Aiken, SC 29803 | \$7,172.83 |
| 2. | Mark R. Johnson
30052 Corte Carrizo
Temecula, CA 92591 | \$3,330.32 |
| 3. | Jerry L. Gibbons
Jerry L. Gibbons Trust
15958 Trow Bridge road
Chesterfield, MO 63017 | \$15,785.48 |
| 4. | John Mullin
John Mullin Trust
7109 Quito Court
Camarillo, CA 93012 | \$15,846.78 |
| 5. | Rob Robin
55 Bliss Road
Newort, RI 02840 | \$879.70 |
| 6. | John and Muriel Menig
John and Muriel Menig Trust
130 Thunderbird Court
Aptos, CA 95003 | \$5,328.76 |
| 7. | Albert & Lucille Notermann
Noterman Rev. Fam. Trust
24720 Cruise Circle Dr.
Canyon Lake, CA 92587 | \$8,357.14 |
| 8. | Arthur & Irma Buroglio
Buroglio Family Trust
3601 Vista Way
Hemet, CA 92544 | \$1,759.40 |
| 9. | Dennis L. Jackson
30903 Avenida Del Reposo
Temecula, CA 92591 | \$6,892.75 |
| 10. | Eldora White
2230-155 Lake Park Dr.
San Jacinto, CA 92583 | \$12,203.29 |

- | | | |
|-----|---|-------------|
| 11. | Floyd Peters
26883 Marlyce Lane
Hemet, CA 92543 | \$1,759.40 |
| 12. | James & Phyllis Lemmons
551 S. Lyon Ave.
San Jacinta, CA 92582 | \$4,750.37 |
| 13. | Jesse Theodore Walker
Jesse Theodore Walker Trust
12218A Orchid Lane
Moreno Valley, CA 92557 | \$2,752.10 |
| 14. | Kenneth Sigsbee
16255 Via Rancho
Riverside, CA 92508 | \$4,547.68 |
| 15. | Seth & Marjorie Shenton
Shenton Family Trust
2473 Emerson Dr.
Corona, CA 91720 | \$9,613.38 |
| 16. | Stephen Skidmore
P. O. Box 390871
Anza, CA 92539 | \$11,110.42 |
| 17. | Judith Patillo
927 Yellowjacket #513
Rockwall, TX 75087 | \$3,908.51 |
| 18. | Salvatore Anthony Cascio
2252 Barksdale Blvd.
Bossier City, LA 71112 | \$12,489.76 |
| 19. | Janie Thomas
1020 Mack Ave.
Orlando, FL 32805 | \$25,060.84 |
| 20. | Thomas and Dorothy Mizak
969 E. Palm Valley Dr.
Oviedo, FL 32765 | \$3,400.02 |
| 21. | Judy Ann Camp
P. O. Box 3315
Port Charlotte, FL 33949 | \$3,872.44 |

- | | | |
|-----|--|-------------|
| 22. | Robert L. and Shirley May Crandall
Robert L. and Shirley Crandall Trust
13545 Newport Ave.
Port Charlotte, FL 33981 | \$6,615.54 |
| 23. | Robert F. Crane
Robert F. Crane Trust
2701 Regency Oaks Blvd., #A302
Clearwater, FL 33759 | \$22,432.32 |
| 24. | June S. Erskin, Trustee
June S. Erskin Trust
2395 Harbor Blvd., Apt. 303
Port Charlotte, FL 33952 | \$2,260.19 |
| 25. | Robert & Carol McMullen
Robert & Carol McMullen Rev. Trust
112 Sandstone Circle
Venice, FL 34293 | \$2,649.74 |
| 26. | Dana Reynolds, Jr.
133 Breaker Court #205
Punta Gorda, FL 33950 | \$3,897.69 |
| 27. | Elroy Schwarze
65 Ocean Dr.
Punta Gorda, FL 33950 | \$22,386.17 |
| 28. | John & Helen Sisk
334 Severin Rd.
Fort Charlotte, FL 33952 | \$1,810.78 |
| 29. | Clyde Woodman
Clyde Woodman Trust
261 Lido Dr.
Punta Gorda, FL 33950 | \$2,614.40 |

Remailed to:

275 Commonwealth Dr., Apt. G-12
Greenville, SC 29615

30.	Phillip & Jene Nutzman Phillip & Jene Nutzman Liv. Trust 132 Oak Shadow Drive Santa Rosa, CA 95409	\$5,051.05
31.	Harold M. and Theresa Kueffer 20179 Village 20 Camarillo, CA 93012	\$5,861.39
32.	Steven W. Johnson 22800 Savi Ranch Pkwy Suite 216 Yorba Linda, CA 92887-4623	\$1,759.39
33.	David and Anne Radden David & Anne Raden Trust 4250 Glencoe Ave. Apt. 1111 Marina Del Rey, CA 90292	\$6,680.45
TOTAL:		\$244,840.48

STEVEN W. SOULE', TRUSTEE
320 S. BOSTON AVENUE
SUITE 400, 3RD FLOOR
TULSA, OK 741033708

PAYMENT OF UNCLAIMED FUNDS

CUSTOMER CONNECTION

10/26/06 TX

CHECK NUMBER

281

DATE

AMOUNT

10/26/06

*****244,840.48

1644155

PAY TO THE ORDER OF

NORTHERN DISTRICT COURT CLERK
224 SOUTH BOULDER, 1ST FLOOR
TULSA, OK 74103

CASE NUMBER

99-01273

M

Debtor: TIGER PETROLEUM COMPANY

ESTATE OF

Two Hundred Forty Four Thousand Eight Hundred Forty Dollars

And 48/100

RECEIVER/TRUSTEE/DEBTOR IN POSSESSION/ASSIGNEE

THIS CHECK VOID AFTER 90 DAYS

⑈000781⑈ ⑆111000012⑆ 4428228240⑈

Date: 10/26/06	Check Number: 281	Amount: 244,840.48
Case Number: 99-01273 M Debtor Name: TIGER PETROLEUM COMPANY SSN: 731-35-7605		
Paid To: NORTHERN DISTRICT COURT CLERK 224 SOUTH BOULDER, 1ST FLOOR TULSA, OK 74103	Trustee: STEVEN W. SOULE', TRUSTEE 320 S. BOSTON AVENUE SUITE 400, 3RD FLOOR TULSA, OK 74103-3708	
Description: PAYMENT OF UNCLAIMED FUNDS		
Bank Account Number: 4428228240		

Last Will and Testament of

JAMES G. LEMMONS

I, JAMES G. LEMMONS, presently residing at San Jacinto, Riverside County, California, declare this to be my Last Will and Testament, hereby expressly revoking any and all other Wills and/or Codicils to Wills previously made by me.

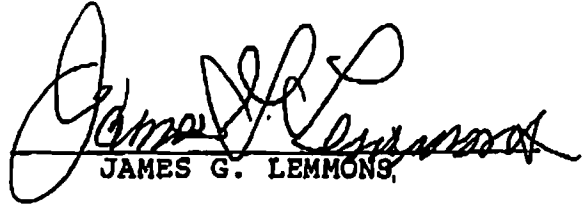
FIRST: I declare that I am a widower, my wife, PHYLLIS M. LEMMONS, having passed away November 24, 1995. I further declare that I have never had any children.

SECOND: It is my intent by this Will to dispose of all of the property of my estate, real, personal and mixed, and where-soever the same may be situated, that I have the right to dispose of by Will, including any and all property over which I may have the power of appointment by Will.

THIRD: I direct my executor, hereinafter named, or any person who is duly authorized to administer upon my estate, to pay the expenses of my last illness, funeral and burial, as soon as practicable after my death.

I have made pre-paid funeral arrangements with McWane Family Funeral Home, Hemet, California, and pre-paid burial arrangements with Campbell & Lewis Funeral Home, Sweetsprings, Missouri.

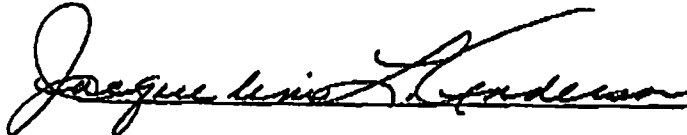
I subscribe my name to this Will this 1 day of August, 1996.


JAMES G. LEMMONS

On the date written before, JAMES G. LEMMONS declared to us, the undersigned, that this instrument, consisting of three (3) pages, including the page signed by us as witnesses, was his Will and requested us to act as witnesses to it. He thereupon signed this Will in our presence, all of us being present at the same time. We now, at his request, in his presence, and in the presence of each other, subscribe our names as witnesses.

Executed this 1 day of August, 1996, at Hemet, California. We declare under penalty of perjury that the foregoing is true and correct.

 residing at Hemet, California.

 residing at Hemet, California.

JAMES A. COX

COX & COX
A PROFESSIONAL CORPORATION
ATTORNEYS AT LAW

TEL (909) 682-1400
FAX (909) 682-3000

605 EAST FLORIDA AVENUE
HEMET, CALIFORNIA 92343

THREE

Verification of Right to Claim
SECOND CODICIL TO WILL OF

JAMES G. LEMMONS DATED AUGUST 1, 1996

I, James G. Lemmons, a resident of Riverside, California, declare that this is the second codicil to my will dated August 1, 1996, as amended by the first codicil thereto dated August 18, 1996.

Section 1. ARTICLE SIXTH of the above-mentioned will, together with any subsequent modifications, amendments, revisions, or substituted versions of that section, is hereby revoked, and the following new ARTICLE SIXTH is substituted in its place:

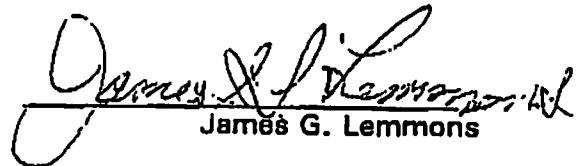
"SIXTH: I hereby nominate and appoint the then acting potentate of the El Bekal Shrine Temple located in Anaheim, California, Executor hereof, to serve without bond.

The term "my Executor" as used in this Will shall include any personal representative of my estate."

Section 2. In every other respect, I confirm and republish my will dated August 1, 1996, as amended by the first codicil thereto dated August 18, 1996.

The foregoing second codicil to my will dated August 1, 1996, is executed on

4/6/98, at Desert, California.


James G. Lemmons

Second codicil to the Will of James G. Lemmons

On the date written above, we, the undersigned, each being present at the same time, witnessed the signing of this instrument by James G. Lemmons. At that time, James G. Lemmons appeared to us to be of sound mind and memory and, to the best of our knowledge, was not acting under fraud, duress, menace, or undue influence. Understanding this instrument, which consists of 2 pages, including the pages on which the signature of James G. Lemmons and our signatures appear, to be the second codicil to the will of James G. Lemmons dated August 1, 1996, we subscribe our names as witnesses thereto.

We declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Executed on 4-6-98, at Hemet, California.

Carol Lorinto residing at 805 E. Florida Ave
Witness Street Address
Carol Lorinto Hemet, California
City

Norman M. Overlock residing at 209 N LA PALOMA AVE
Witness Street Address
NORMAN M. OVERLOCK SAN JACINTO, California
City

UNITED STATES BANKRUPTCY COURT

In re:) Case No.99-01273
Tiger Petroleum Comp)
) Chapter 7
Debtor)
)

AFFIDAVIT OF CREDITOR

I, James M Full, Executive Vice Pres of Shriners Hospitals for Children the undersigned creditor in the above referenced case declare as follows:

1. THE FINANCIAL RESOURCES GROUP, INC. has been granted a limited power of attorney by me to submit an Application For Payment of Unclaimed Funds seeking payment in the amount of \$4,750.37 due and owing to James G & Phyllis M Lemmons as a creditor in the above referenced bankruptcy case.

2. My name, position with the company (if applicable), address, and telephone number are as follows:

James M Full, Executive Vice Pres
P O Box 31356
Tampa, FL 33631-3356
Phone: 813-281-7153

3. I (or the company which I represent) have neither previously received remittance for this claim nor have contracted with any other party other than the person named in item one above to recover these funds.

I declare under penalty of perjury that the foregoing statements are true and correct to the best of my knowledge and belief.

Dated: 11-26-08

James M Full
James M Full, Executive Vice Pres
Shriners Hospitals for Children

Tax ID # 36-2193608

Subscribed and sworn to before me this
26th day of November, 20 08.

Susan A. Breidling
NOTARY PUBLIC, AT LARGE
STATE OF FLORIDA; COUNTY OF HILLSBOROUGH
My Commission Expires: 2-17-11



SUSAN A. BREIDLING
Commission DD 830685
Expires February 17, 2011
Bonded Thru Troy Fahn Insurance 800-363-7010

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF OKLAHOMA**

In re:
Debtor

Tiger Petroleum Comp

Case No: 99-01273
Chapter: 7

SPECIAL POWER OF ATTORNEY

To The Financial Resources Group, Inc., of 700 Mechem Dr., Suite 8B, Ruidoso, NM 88345

The undersigned claimant hereby authorizes the above named funds locator firm, Attorney-in-fact for the undersigned for ~~me~~ (us), (~~we~~), to act in ~~my~~ (our), (~~us~~) place and stead and for the benefit, ONLY to collect and disburse abandoned funds, or undistributed, unclaimed, or undelivered tenders or funds in the amount of:

\$4,750.37

Dated: 11-26-08

Signed: 

As James M Full, Executive Vice Pres
Shriners Hospitals for Children
Address: P O Box 31356
Tampa, FL, 33631-3356
Tax ID Number: 36-2193608



**Shriners Hospitals
for Children™**

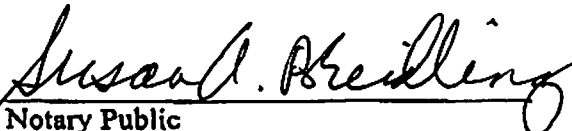
International
Headquarters
Pediatric Specialty Care

James M. Full, FACHE
Executive Vice President
Chief Operating Officer

2900 Rocky Point Dr.
Tampa, FL 33607
Direct: 813.281.8111
Fax: 813.281.8174
E-mail: jfull@shrinenet.org

Affix Corporate Seal Here

Acknowledged before me Susan A. Breidling, by James M. Full, FACHE, who says that he (~~she~~) is a member of the partnership or corporation named above and is authorized to execute this power of attorney in its behalf.



Notary Public

My Commission Expires: 2-17-11

11-26-08
Date
(seal)



SUSAN A. BREIDLING
Commission DD 630685
Expires February 17, 2011
Bonded thru Troy Felt Insurance 800-633-7019

BE IT RESOLVED, that any two of the following: Chairman of the Board of Directors; President; First Vice President; Second Vice President; Secretary; Assistant Secretary; Treasurer; Executive Vice President; General Counsel; Vice President, Legal; Vice President, Finance; and Director of Investment and Asset Management, are authorized, on behalf of Shriners Hospitals for Children, a Colorado corporation:

14. To sell and convey any real property and appurtenances, mineral estates, and water rights belonging to said Corporation; and upon the receipt of the consideration or purchase price for the same, the purchaser paying such consideration to said Corporation shall be exonerated from seeing to the application of the proceeds thereof.
15. To make and execute real property contracts, real property listing agreements, deeds of conveyance, assignments, and leases affecting real properties, mineral estates and water rights; satisfactions or discharges of mortgages; requests for reconveyance of deeds of trusts, and any documents that may be necessary for the acquisition, sale, conveyance, and improvement of real property, mineral estates and water rights.
16. To make and execute powers of attorney on behalf of the Corporation.
17. To execute investment management agreement contracts with such fiduciaries as the Investment Committee shall determine; and to execute such documents as may be necessary to withdraw assets from investment management fiduciaries and to amend such contracts as may be deemed necessary.
18. To open or terminate bank accounts, savings and loan accounts, savings bank accounts, and credit union accounts on behalf of the Corporation which are received from estates and trusts benefiting the Corporation.

BE IT FURTHER RESOLVED, that the Chairman of the Board of Directors or the President is authorized, on behalf of Shriners Hospitals for Children, a Colorado corporation, to execute any documents necessary for the effective operation of the Corporation which are not set out elsewhere in this Resolution.

BE IT FURTHER RESOLVED, that the Executive Vice President is authorized, on behalf of Shriners Hospitals for Children, a Colorado corporation, to execute any documents necessary for the effective operation of the Corporation which are not set out elsewhere in this Resolution for matters involving amounts under Five Hundred Thousand and no/100 Dollars (\$500,000.00).

I, Ralph W. Semb as President, do hereby
certify that James M. Full, FACHE is Executive Vice President
_____ of Shriners Hospitals for Children, a corporation
duly organized and existing under the laws of the State of Colorado, and that the foregoing is a true copy of a resolution duly adopted
by the Board of Directors of said corporation at a duly and legally convened and regular meeting thereof held in
Tampa, Florida, on Novmeber 12, 2008, at which
there was present a quorum of the Directors thereof.

I do further certify that said resolution is still in full force and effect and has never been modified or repealed.

IN WITNESS WHEREOF, I have hereunto set my hand and caused the corporate seal of said Shriners Hospitals for Children
to be affixed hereto this 19th day of November, 2008.



SHRINERS HOSPITALS FOR CHILDREN
a Colorado Corporation

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2008
Secretary of State

DOCUMENT# 821162

Entity Name: SHRINERS HOSPITALS FOR CHILDREN, INC.

Current Principal Place of Business:

2900 ROCKY POINT DRIVE
TAMPA, FL 33607 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 31356
TAMPA, FL 336313356

New Mailing Address:

FEI Number: 36-2193608

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: BRACEWELL, GENE
Address: 1015 THIMBLEGATE CT
City-St-Zip: ALPHARETTA, GA 30022

Title: P () Delete
Name: SEMB, RALPH W
Address: 66 FRENCH KING HIGHWAY
City-St-Zip: IRVING, MA 01344

Title: VP () Delete
Name: BERNARD, LEMIEUX M.D.
Address: 649 FRONT STREET
City-St-Zip: PERRYSBURG, OH 43511

Title: D () Delete
Name: SEVERE, MICHAEL G
Address: 1798 ALPINE DRIVE
City-St-Zip: ERIE, CO 80516

Title: D () Delete
Name: MADSEN, ALAN W
Address: 18410 BALMORE PINES LANE
City-St-Zip: CORNELIUS, NC 28031

Title: S () Delete
Name: TERRANCE, MCGUIRE
Address: 11515 WHISPER DEW
City-St-Zip: SAN ANTONIO, TX 78230

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: DOUGLAS, MAXWELL
Address: 15148 ISLEVIEW DRIVE
City-St-Zip: CHESTERFIELD, MO 63017

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: GEORGE, MITCHELL
Address: 2381 N. SERVICE STATION ROAD
City-St-Zip: JORDAN STATION, ON LOR 1S0 CA

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RALPH W. SEMB

PRES

04/15/2008

Electronic Signature of Signing Officer or Director

Date

